

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | TD. | | 4-25-00 |
| O.P.E. CLASSIFIER | RSD | | 9/30/00 |
| FORMALITY REVIEW | RSD | 01770 | 10-28-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Nonselected
 - Allowed I Interference
 (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

09/661,778

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY